



**THOMAS L. GARTHWAITE, M.D.**  
Director and Chief Medical Officer

**FRED LEAF**  
Chief Operating Officer

COUNTY OF LOS ANGELES  
DEPARTMENT OF HEALTH SERVICES  
313 N. Figueroa, Los Angeles, CA 90012  
(213) 240-8101

**BOARD OF SUPERVISORS**

**Gloria Molina**  
First District

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Fifth District

December 2, 2004

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

Dear Supervisors:

**THE COMMUNITY HEALTH PLAN**  
(All Districts) (3 Votes)

**IT IS RECOMMENDED THAT YOUR BOARD:**

1. Delegate authority to the Director of Health Services, or his designee, to negotiate and execute an Amendment extension and a renewal Agreement between the Department of Health Services' Community Health Plan (CHP) and the L.A. Care Health Plan (L.A. Care), effective January 1, 2005 through December 31, 2006 and approve revisions as requested by State law and regulations following the review and approval by County Counsel and notification to the Board.
2. Approve and instruct the Director of Health Services, or his designee, to offer and execute Amendment No. 6, substantially similar to Exhibit I, with the CHP Medi-Cal Managed Care Program and County Temporary Employees Program (MMCP/CTEP) contractors listed in Attachment B on a month-to-month basis to extend the current Agreements and delegate authority to the Director of Health Services to approve revisions to the Agreements as required by State law and regulations, following the review and approval by County Counsel and notification to the Board, effective January 1, 2005, through December 31, 2005.
3. Delegate authority to the Director of Health Services, or his designee, to offer and execute revised Amendment No. 2 to the Healthy Families Program (HFP) network Agreement No. H-211224 with Universal Care effective retroactively to July 1, 2004 through June 30, 2005; and authorize the Director of Health Services, or his designee, to approve revisions to this Agreement as requested by State law and regulation, following the review and approval by County Counsel and notification to the Board.
4. Delegate authority to the Director of Health Services, or his designee, to offer and execute Board-approved standard form agreements, as may be amended from time to time, as required by State laws and regulations, with qualified providers listed in Attachment C, for any or all CHP product lines of business, including MMCP/CTEP, HFP and the In-Home Supportive Services (IHSS) Workers Health Benefits Program

for the Personal Assistance Services Council Services Employees International Union (PASC-SEIU) Homecare Workers Health Care Plan, provided that CHP requires such agreements to increase service capacity or access for its members, and that such providers meet CHP's contracting criteria listed in Attachment D, following the review and approval by County Counsel and notification to the Board.

5. Delegate authority to the Director of Health Services, or his designee, to distribute the retroactive Medi-Cal capitation premium funds associated with the State portion of the Orthopedic Hospital Settlement Agreement and any additional funds forthcoming from the settlement received by CHP from L.A. Care in the approximate amount of \$3,000,000 for the period July 2001 through December 2004.

#### PURPOSE/JUSTIFICATION OF THE RECOMMENDED ACTIONS:

The L.A. Care Agreement provides funding for the County's continued participation in the MMCP; the MMCP/CTEP agreement amendments provide for the continued and uninterrupted services to CHP members; the Universal Care HFP network agreement amendment provides continued and uninterrupted services to HFP beneficiaries; and the addition of new providers will assist CHP in providing alternate providers should certain current providers change ownership or no longer be available for CHP members and allow CHP to expand the County's MMCP/CTEP, HFP and the IHSS Programs.

Delegated authority to enter into Agreements with the providers listed on Attachment C will increase the number of providers and improve access to services in CHP's service network and provide a contingency plan and an alternative list of medical providers to provide services to members under all product lines through Agreements which will be negotiated and updated to reflect all current standard County contract provisions.

#### FISCAL IMPACT/FINANCING:

##### MMCP - L.A. Care

The funding for MMCP services is provided by L.A. Care on a per member per month basis, at a capitated rate for each Medi-Cal beneficiary enrolled in CHP.

##### Universal Care HFP Provider Network Agreement

The funding for the HFP network Agreement with Universal Care is fully offset by the Managed Risk Medical Insurance Board (MRMIB) on a per member per month basis, at a capitated rate for each HFP beneficiary enrolled in CHP.

##### MMCP/CTEP, HFP, IHSS Provider Agreements

Funding for the Amendments with MMCP/CTEP, and HFP providers, and any new providers for MMCP/CTEP, HFP and IHSS Programs is partially offset by capitation payments received by CHP for each enrollee.

**EXHIBIT I**

Contract No. \_\_\_\_\_

COUNTY OF LOS ANGELES - COMMUNITY HEALTH PLAN

MEDI-CAL MANAGED CARE PROGRAM  
AND  
COUNTY TEMPORARY EMPLOYEES PROGRAM

AMENDMENT NO. 6

THIS AMENDMENT is made and entered into this \_\_\_\_\_ day  
of \_\_\_\_\_, 2004,

by and between

COUNTY OF LOS ANGELES  
(hereafter "County"),

and

hereafter "Contractor").

WHEREAS, reference is made to that certain document  
entitled "COMMUNITY HEALTH PLAN MEDI-CAL MANAGED CARE PROGRAM  
AND COUNTY TEMPORARY EMPLOYEES PROGRAM SERVICES AGREEMENT",  
dated November 21, 2000, and any amendments thereto, all further  
identified as Agreement No. \_\_\_\_\_ (hereafter "Agreement");  
and

WHEREAS, the parties wish to extend the term of the  
Agreement and to provide other changes set forth herein; and

WHEREAS, Agreement provides that changes may be made in the  
form of written amendment which is formally approved and  
executed by both parties.

NOW, THEREFORE, the parties agree as follows:

1. This Amendment shall become effective January 1, 2005, on a month to month basis for a period not to exceed twelve months, through December 31, 2005, unless terminated earlier pursuant to the provisions of this Agreement.

2. Agreement Paragraph 2, TERM, TERMINATION, RE-NEGOTIATION, AND SUSPENSION, Sub-paragraph A, shall be revised to read as follows:

A. This Agreement shall be effective on or after November 1, 2000 through December 31, 2005, unless earlier terminated as provided herein. It is understood that this Agreement shall be co-terminus with the L.A. Care/County Agreement. Thus, on the date such separate contract expires, is canceled, or is terminated, this Agreement shall also terminate.

The performance of services under this Agreement may be terminated, with or without cause, in whole or in part, from time to time when such action is deemed by County to be in its best interest. Termination of services hereunder shall be effected by delivery to Contractor of a ninety (90) calendar day advance Notice of Termination specifying the extent to which performance of services under this Agreement is terminated and the date upon which such termination becomes effective.

After receipt of a Notice of Termination and except as otherwise directed by County, Contractor shall:

(1) Stop services under this Agreement on the date and to the extent specified in such Notice of Termination; and

(2) Complete performance of such part of the services as shall not have been terminated by such Notice of Termination.

After receipt of a Notice of Termination, Contractor shall submit to County, in the form and with the certifications as may be prescribed by County, its termination claim and invoice. Such claim and invoice shall be submitted promptly, but not later than sixty (60) calendar days from the effective date of termination. Upon failure of Contractor to submit its termination claim and invoice within the time allowed, County may determine on the basis of information available to County, the amount, if any, due to Contractor in respect to the termination, and such determination shall be final. After such determination is made, County shall pay Contractor the amount so determined.

Contractor, for a period of five (5) years after final settlement under this Agreement, shall make available to County, at all reasonable times, all its books, records, documents, or other evidence bearing on the costs and expenses of Contractor under this Agreement in respect to the termination of services hereunder. All such books, records, documents, or other evidence shall be retained by Contractor at a location in Southern California and shall be made available within ten (10) calendar days of prior written notice during County's normal business hours to representatives of County for purposes of inspection or audit.

3. Additional Provisions Paragraph 28, CONTRACTOR'S WARRANTY OF ADHERENCE TO COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM, shall be revised to read as follows:

"28. CONTRACTOR'S WARRANTY OF ADHERENCE TO COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM: The Contractor acknowledges that the County has established a goal of ensuring that all individuals who benefit financially from the County through County contracts are in compliance with their court-ordered child, family and spousal support obligations in order to mitigate the economic burden otherwise imposed upon the County and its taxpayers.

As required by the County's Child Support Compliance Program (County Code Chapter 2.200) and without limiting the Contractor's duty under this Agreement to comply with all applicable provisions of law, the Contractor warrants that is now in compliance and shall during the term of this Agreement maintain compliance with employment and wage reporting requirements as required by Federal Social Security Act (42 USC Section 653a) and California Unemployment Insurance Code Section 1088.5, and shall implement all lawfully served Wage and Earnings Withholding Orders or Child Support Services Department Notices of Wage and Earnings Assignment for Child or Spousal Support, pursuant to Code of Civil Procedure Section 706.031 and Family Code Section 5246(b)."

4. Additional Provisions Paragraph 29, TERMINATION FOR BREACH OF WARRANTY TO MAINTAIN COMPLIANCE WITH COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM, shall be revised to read as follows:

"29. TERMINATION FOR BREACH OF WARRANTY TO MAINTAIN COMPLIANCE WITH COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM:

Failure of Contractor to maintain compliance with the requirements set forth in Additional Provisions Paragraph 46, CONTRACTOR'S WARRANTY OF ADHERENCE TO COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM immediately above, shall constitute a default by the Contractor under this

Agreement. Without limiting the rights and remedies available to the County under any other provision of this Agreement, failure to cure such default within Ninety (90) calendar days of written notice by the Los Angeles County Child Support Services Department shall be grounds upon which the County Board of Supervisors may terminate this Agreement pursuant to Paragraph 3, SUSPENSION AND TERMINATION OF AGREEMENT, GENERAL, of the body of this Agreement, and pursue debarment of Contractor, pursuant to County Code Chapter 2.202."

5. Additional Provisions Paragraph 30, CONTRACTOR'S ACKNOWLEDGMENT OF COUNTY'S COMMITMENT TO CHILD SUPPORT ENFORCEMENT, shall be revised to read as follows:

"30. CONTRACTOR'S ACKNOWLEDGMENT OF COUNTY'S COMMITMENT TO CHILD SUPPORT ENFORCEMENT: Contractor acknowledges that County places a high priority on the enforcement of child support laws and the apprehension of child support evaders. Contractor understands that it is County's policy to encourage all County Contractors to voluntarily post County's L.A.'s Most Wanted: Delinquent Parents poster in a prominent position at Contractor's place of business. The Los Angeles County Child Support Services Department will supply Contractor with the poster to be used."

6. Additional Provisions Paragraph 32, CONTRACTOR RESPONSIBILITY AND DEBARMENT, Subparagraphs C, E, F and G, shall be revised to read as follows:

"C. County may debar Contractor if the Board of Supervisors finds, in its discretion, that the Contractor has done any of the following: (1) violated any term of this Agreement or other contract with County or a non-profit corporation created by the County, (2) committed any act or omission which negatively reflects on Contractor's quality, fitness, or capacity to perform a contract with the County, any other public entity, or a non-profit corporation created by the County, or engaged in a pattern or practice which negatively reflects on same, (3) committed an act or offense which indicates lack of business integrity or business honesty, or (4) made or submitted a false claim against County or any other public entity."

"E. The Contractor Hearing Board will conduct a hearing where evidence on the proposed debarment is presented. The Contractor or Contractor's representative, or both, shall be given an opportunity to submit evidence at that hearing. After the hearing, the Contractor Hearing Board shall prepare a tentative proposed decision, which shall contain a recommendation regarding whether the

Contractor should be debarred, and if so, the appropriate length of time of the debarment. The Contractor and the Department shall be provided an opportunity to object to the tentative proposed decision prior to its presentation to the Board of Supervisors."

"F. After consideration of any objections, or if no objections are submitted, a record of the hearing, the proposed decision and any other recommendation of the Contractor Hearing Board shall be presented to the Board of Supervisors. The Board of Supervisors shall have the right to modify, deny or adopt the proposed decision and recommendation of the Contractor Hearing Board."

"G. These terms shall also apply to subcontractors/ subconsultants of County Contractors."

7. Paragraph 37, NOTICE TO EMPLOYEES REGARDING THE SAFELY SURRENDERED BABY LAW, shall be added to the Additional Provisions, as follows:

"37. NOTICE TO EMPLOYEES REGARDING THE SAFELY SURRENDERED BABY LAW: The Contractor shall notify and provide to its employees, and shall require each subcontractor to notify and provide to its employees, a fact sheet regarding the Safely Surrendered Baby Law, its implementation in Los Angeles County, and where and how to safely surrender a baby. Attached hereto and incorporated

herein by reference is the fact sheet and is also available on the Internet at [www.babysafela.org](http://www.babysafela.org) for printing purposes."

8. Paragraph 38, CONTRACTOR'S ACKNOWLEDGMENT OF COUNTY'S COMMITMENT TO THE SAFELY SURRENDERED BABY LAW, shall be added to the Additional Provisions, as follows:

"38. CONTRACTOR'S ACKNOWLEDGMENT OF COUNTY'S COMMITMENT TO THE SAFELY SURRENDERED BABY LAW: The Contractor acknowledges that the County places high priority on the implementation of the Safely Surrendered Baby Law. The Contractor understands that it is the County's policy to encourage all County Contractors to voluntarily post the County's "Safely Surrendered Baby Law" poster in a prominent position at the Contractor's place of business. The Contractor will also encourage its Subcontractors, if any, to post this poster in a prominent position in the Subcontractor's place of business. The County's Department of Children and Family Services will supply the Contractor with the poster to be used."

9. Paragraph 39, CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSIONS-LOWER TIER COVERED TRANSACTIONS (45 C.F.R. PART 76), shall be added to the Additional Provisions, as follows:

"39. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION-LOWER TIER COVERED TRANSACTIONS (45 C.F.R. PART 76): Contractor hereby acknowledges that the County is prohibited from contracting with and making sub-awards to parties that are suspended, debarred, ineligible, or excluded or whose principals are suspended, debarred, eligible, or excluded from securing federally funded contracts. By executing this Agreement, Contractor certifies that neither it nor any of its owners, officers, partners, directors or other principals is currently suspended, debarred, eligible, or excluded from securing federally funded contracts. Further, by executing this Agreement, Contractor certifies that, to its knowledge, none of its subcontractors, at any tier, or any owner, officer, partner, director or other principal of any subcontractor is currently suspended, debarred, eligible, or excluded from securing federally funded contracts. Contractor shall immediately notify County in writing, during the term of this Agreement, should it or any of its subcontractor or any principals of either be suspended, debarred, eligible, or excluded from securing federally funded contracts. Failure of Contractor to comply with this provision shall constitute a material breach of this

Agreement upon which the County may immediately terminate or suspend this Agreement."

10. Paragraph 40, NON-PAYMENT FOR SERVICES FOLLOWING EXPIRATION/TERMINATION OF AGREEMENT, shall be added to the Additional Provisions, as follows:

"40. NON-PAYMENT FOR SERVICES FOLLOWING EXPIRATION/TERMINATION OF AGREEMENT: Contractor shall have no claim against County for payment of any money or reimbursement, of any kind whatsoever, for any service provided by Contractor after the expiration or other termination of this Agreement. Should Contractor receive such payment it shall immediately notify County and shall immediately repay all such funds to County. Payment by County for services rendered after expiration/termination of this Agreement shall not constitute a waiver of County's right to recover such payment from Contractor. This provision shall survive the expiration or other termination of this Agreement."

11. Schedule B-1, REVISED CAPITATION RATES, shall be added as part of the Agreement to reflect the new agreed upon confidential capitation rates. These new capitation rates shall supersede the capitation rates presented in Exhibit B, BILLING AND PAYMENT, attached and incorporated in the Agreement.

12. Exhibit "C", DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES, MEDI-CAL MANAGED CARE PROGRAM, shall be replaced in its entirety as presented in Exhibit C-1.

13. Except for the changes set forth hereinabove, Agreement shall not be changed in any respect by this Amendment.

IN WITNESS WHEREOF, the Board of Supervisors of the County Of Los Angeles has caused this Amendment to be subscribed by its

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Director of Health Services, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officers, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By \_\_\_\_\_  
Thomas L. Garthwaite, M.D.  
Director and Chief Medical Officer

\_\_\_\_\_  
Contractor

By \_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

(AFFIX CORPORATE SEAL)

APPROVED AS TO FORM  
BY THE OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT  
ADMINISTRATION:

Department of Health Services

By: \_\_\_\_\_  
Irene E. Riley  
Director, Contract Administration

MMCP\_CTEP AmendNo6  
LN: January 1, 2005

### Retroactive Orthopedic Hospital Settlement

The State DHS, through L.A. Care, is funding approximately \$3,000,000 of retroactive Medi-Cal premiums associated with the Orthopedic Hospital Settlement Agreement, for distribution by CHP to MMCP/CTEP providers.

### FACTS AND PROVISIONS/LEGAL REQUIREMENTS:

The CHP, a full-service Knox-Keene licensed and federally qualified Health Maintenance Organization (HMO), is the County's publicly operated HMO administered by the Department's Office of Managed Care. CHP provider services are funded by L.A. Care for Medi-Cal beneficiaries under the State's Two-Plan Managed Care Program, by the County for County temporary employees, and by MRMIB for HFP subscribers and the County and MRMIB for the IHSS Program enrollees.

### MMCP-L.A. Care Agreement

On February 11, 1997, the Board approved the L.A. Care Agreement for the MMCP. On subsequent occasions, the Board approved a new Agreement effective December 2002 and three Amendments through December 31, 2004.

Negotiations with L.A. Care for a new Agreement are ongoing. To the extent a replacement Agreement cannot be executed by December 31, 2004, the Department intends to enter into an Amendment extension of the current Agreement upon substantially similar terms and conditions. As with the existing Agreement, the replacement Agreement will comply with all applicable State laws and regulations. Upon execution by the parties, a copy will be provided to the Board offices.

### MMCP Provider Agreements

The MMCP/CTEP Agreements were originally approved by the Board on November 21, 2000. On subsequent occasions, the Board approved five extensions of these Agreements through December 31, 2004. By way of this Amendment, the Department is revising the rates paid to providers and other contract language updates to reflect negotiated financial responsibilities for covered services between the CHP and its providers.

### Universal Care HFP Provider/Network Agreements

On May 19, 1998, the Board approved the initial Agreements with private individual physicians, medical groups, and hospitals, including a network agreement with Universal Care, to provide health services to eligible HFP children enrolled in CHP, effective May 1, 1998 through June 30, 2000. On June 20, 2000, the Board approved a new agreement with Universal Care effective July 1, 2000 through June 30, 2004.

On June 15, 2004, the Board approved an Amendment for HFP providers extending the term of the Agreements through June 30, 2005. Recently, Universal Care notified CHP of certain revisions to the Amendment prior to execution. The CHP anticipates completing negotiations within 30 days, with execution of the Amendment following review and approval by County Counsel.

#### MMCP/CTEP, HFP IHSS Provider Agreements

In 1998, 2000 and 2002, the Board approved a standard form provider Agreement for the HFP, MMCP/CTEP and IHSS product lines, respectively. As part of this approval and with the approval of subsequent Amendments, the Board delegated authority to the Department to offer and execute these Board approved agreements to listed providers meeting specified criteria. The Department has revised the provider list and criteria and now seeks delegated authority to continue to offer the Board approved Agreements.

#### Orthopedic Hospital Settlement Agreement

As background, in 1990 a suit was filed by Orthopedic Hospital and a member Hospital Association against the State claiming inadequate Medi-Cal provider reimbursement rates. The 9<sup>th</sup> Circuit Court of Appeals found that the Medi-Cal fee-for-service outpatient hospital reimbursement rates did not comply with federal law requiring the reimbursement to bear a reasonable relationship to the cost of care. A settlement was reached between the parties which will provide an increase in outpatient hospital fee-for-service reimbursement rates effective July 1, 2001. Although the settlement did not address managed care rates, the increase in fee-for-service rates affected the calculation of the capitation rates paid by DHS to its contracted health plans. DHS updated the capitation actuarial model in July 2002.

CHP initially received the retroactive Orthopedic Hospital settlement funds on September, 2002 and continues to receive the Orthopedic settlement funds (period covered: July, 2001 through December, 2004). The amount has since been carried as a liability on CHP's financial records. Following Board approval, CHP will distribute the funds to MMCP/CTEP providers. Due to CHP's pressing priorities, including completing the actuarial study related to assumption of risk for injectable medications, the CHP was unable to distribute the retroactive Orthopedic Hospital settlement funds in a timely manner.

Attachments A, B, C and D provide additional information.

Exhibit I has been approved as to form by County Counsel.

#### CONTRACTING PROCESS:

The standard form agreements will be offered for all CHP product lines of business to interested and qualified providers listed on Attachment C, provided that CHP requires such agreements to increase service capacity or access for its members, and that such providers meet CHP's contracting criteria listed in Attachment D, following approval as to form by County Counsel.

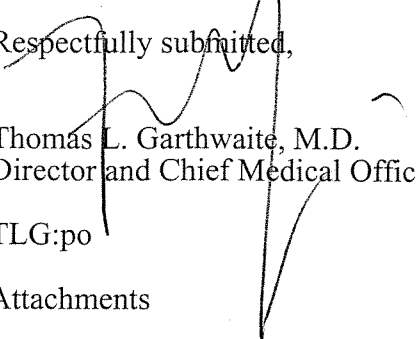
#### IMPACT ON CURRENT SERVICES (OR PROJECTS):

Services provided to CHP members will continue uninterrupted.

The Honorable Board of Supervisors  
December 2, 2004  
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When approved, this Department requires four signed copies of the Board's action.

Respectfully submitted,

  
Thomas L. Garthwaite, M.D.  
Director and Chief Medical Officer

TLG:po

Attachments

c: Chief Administrative Officer  
County Counsel  
Executive Officer, Board of Supervisors

BLETC3557.PO

SUMMARY OF AGREEMENT

1. Types of Services:

Community Health Plan (CHP) provides or arranges for health services to individuals enrolled in the CHP's Medi-Cal Managed Care Program/County Temporary Employees Program (MMCP/CTEP), Healthy Families Program (HFP), and In-Home Supportive Services (IHSS) Workers Health Benefits Program for the Personal Assistance Services Council Services Employees International Union (PASC-SEIU) Homecare Workers Health Care Plan. These services are delivered through County facilities, capitated primary and specialty care contractors affiliated with capitated private hospital contractors, fee-for-service private hospital contractors, and subcontracted pharmacies under the pharmacy benefit manager contractor.

2. Agencies and Contact Persons:

L.A. Care Health Plan Attention: Howard Kahn, CEO  
555 West Fifth Street, 29<sup>th</sup> Floor Telephone: (213) 694-1250  
Los Angeles, CA 90013

Universal Care H-211224 Attention: Howard E. Davis, President/CEO  
1600 East Signal Hill Street Telephone: (562) 424-6200  
Signal Hill, CA 90755

Current MMCP/CTEP contractors are listed on Attachment B. Recommended contractors interested in providing health services to CHP members are listed on Attachment C.

3. Term:

The L.A. Care agreement extends the term through December 31, 2006. Amendment No. 6 to the MMCP/CTEP agreements extends the term, on a month-to-month basis through December 31, 2005. Amendment No. 2 to the HFP "network" agreement with Universal Care extends the term through June 30, 2005.

4. Financial Information:

Funding for the MMCP services is provided by L.A. Care on a per member per month basis, at a capitated rate for each Medi-Cal beneficiary enrolled in CHP, and by the County for eligible County Temporary Employees. Funding for the HFP is provided by MRMIB on a per member per month basis, at a capitated rate for each HFP beneficiary enrolled in CHP.

5. Geographic Area To Be Served:

Countywide

6. Accountable for Monitoring:

Robert Lonardo, Director

7. Approvals:

Office of Managed Care: Robert Lonardo, Director

Contracts and Grants Division: Irene E. Riley, Director, Contract Administration

County Counsel: Edward Morrissey, Deputy County Counsel

**COMMUNITY HEALTH PLAN  
MEDI-CAL MANAGED CARE PROGRAM AND COUNTY TEMPORARY EMPLOYEES PROGRAM**

**CONTRACTS EXPIRING DECEMBER 31, 2004  
CONTRACTS RENEWAL TERM: JANUARY 1, 2005 THROUGH DECEMBER 31, 2005**

CONTRACTOR NAME		CONTRACT NUMBER	AFFILIATED MEDICAL GROUP / IPA / HOSPITAL
<b>HOSPITAL AGREEMENTS+B59</b>			
1	Adventist Health dba White Memorial Medical Center	H212408	Family Care Specialists IPA
2	Catholic Healthcare West Southern California dba California Hospital Medical Center	H213048	Health Care L.A.
3	Citrus Valley Health Partners	H211929	Citrus Valley Physicians Group
4	Citrus Valley Health Partners	H212054	Doctors Medical Group
5	Citrus Valley Health Partners	H212055	Health Care L.A.
6	Citrus Valley Health Partners	H212057	Altamed Health Services Corporation
7	CVHS Hospital Corporation dba Centinela Hospital Medical Center	H212715	Global Care Medical Group, IPA
8	HealthSmart Pacific, Inc. dba Pacific Hospital of Long Beach	H212135	Asian Community Medical Group
9	Jupiter Bellflower Doctors Hospital dba Bellflower Medical Center	H300061	Community Family Care Medical Group IPA, Inc.
10	Jupiter Bellflower Doctors Hospital dba Bellflower Medical Center	H207705	Joy Medical Associates, Inc.
11	Long Beach Memorial Medical Center	H212281	La Vida Medical Group, and IPA
12	Monterey Park Hospital	H207706	South Atlantic Medical Group
13	Pomona Valley Hospital Medical Center	H212714	Pomona Valley Medical Group, Inc.
14	Tenet Healthcare Corporation dba Monterey Park Hospital	H213348	Joy Medical Associates, Inc.
15	Tenet Healthsystem Hospitals, Inc., A Delaware Corporation; Tenet Healthsystem Medical Inc., A Delaware Corporation; Tenet Healthsystem Healthcorp, A Delaware Corporation dba Centinela Hospital Medical Center, Community Hospital of Huntington Park and Mission Hospital of Huntington Park	H212319	Meridian Medical Group dba Capnet IPA
16	Tenet Health System Hospitals, Inc., A Delaware Corporation dba Garfield Hospital Medical Center	H212823	Physicians Healthways Medical Corporation
17	Valley Presbyterian Hospital	H300273	Community Family Care Medical Group IPA, Inc.
18	Valley Presbyterian Hospital	H207823	Northeast Valley Health Corporation
<b>PRIMARY CARE AGREEMENTS</b>			
19	Arroyo Vista Family Health Center	H211993	
20	El Dorado Community Health Center	H211889	
21	Meridian Medical Group dba Capnet IPA	H211879	
22	Northeast Valley Health Corporation	H213049	
23	Tender Care Medical Group	H211909	

**COMMUNITY HEALTH PLAN  
MEDI-CAL MANAGED CARE PROGRAM AND COUNTY TEMPORARY EMPLOYEES PROGRAM**

CONTRACTS EXPIRING DECEMBER 31, 2004  
CONTRACTS RENEWAL TERM: JANUARY 1, 2005 THROUGH DECEMBER 31, 2005

CONTRACTOR NAME		CONTRACT NUMBER	AFFILIATED MEDICAL GROUP / IPA / HOSPITAL
<b>PRIMARY AND SPECIALTY CARE AGREEMENTS</b>			
			Citrus Valley Health Partners
24	AltaMed Health Services Corporation	H212365	Citrus Valley Health Partners
25	Asian Community Medical Group, Inc.	H212134	HealthSmart Pacific, Inc. dba Pacific Hospital of Long Beach
26	Citrus Valley Physician's Group	H211959	Citrus Valley Health Partners
27	Community Family Care Medical Group IPA, Inc.	H300274	Valley Presbyterian Hospital
28	Community Family Care Medical Group IPA, Inc.	H207822	Jupiter Bellflower Doctors Hospital dba Bellflower Medical Center
29	Doctors Medical Group	H212048	Citrus Valley Health Partners
30	Family Care Specialists IPA	H212047	Adventist Health dba White Memorial Medical Center
31	Global Care Medical Group, IPA	H212038	CVHS Hospital Corporation dba Centinela Hospital Medical Center
32	Health Care L.A.	H212052	Citrus Valley Health Partners
33	Health Care L.A.	H212781	Catholic Healthcare West Southern California dba California Hospital Medical Center
34	Joy Medical Associates, Inc.	H213330	Tenet Healthcare Corporation dba Monterey Park Hospital
35	Joy Medical Associates, Inc.	H207664	Jupiter Bellflower Doctors Hospital dba Bellflower Medical Center
36	La Vida Medical Group, and IPA	H212280	Long Beach Memorial Medical Center
37	Meridian Medical Group dba Capnet, Inc.	H212020	Tenet Healthsystem Hospitals, Inc., A Delaware Corporation; Tenet Healthsystem Medical Inc., A Delaware Corporation; Tenet Healthsystem Healthcorp, A Delaware Corporation dba Centinela Hospital Medical Center, Community Hospital of Huntington Park and Mission Hospital of Huntington Park
38	Northeast Valley Health Corporation	H207824	
39	Physicians Healthways Medical Corporation	H212778	Tenet Health System Hospitals, Inc., A Delaware Corporation dba Garfield Hospital Medical Center
40	Pomona Valley Medical Group, Inc.	H212373	Pomona Valley Hospital Medical Center
41	South Atlantic Medical Group	H207615	Monterey Park Hospital
<b>FEE-FOR-SERVICE AGREEMENTS</b>			
42	Antelope Valley Hospital District dba Antelope Valley Hospital	H211926	
43	Harbor/UCLA Medical Foundation, Inc.	H211899	
44	Lancaster Hospital Corporation	H212106	

**COMMUNITY HEALTH PLAN  
RECOMMENDED CONTRACTORS FOR ALL PRODUCT LINES**

CONTRACTOR NAME		PRIMARY GEOGRAPHIC DMHC* AREA(S)
<b>TYPE OF EXHIBIT: HOSPITAL AGREEMENT</b>		
1	Adventist Health	Various
2	Adventist Health dba Glendale Adventist Medical Center	W. San Gabriel Valley
3	Adventist Health dba White Memorial Medical Center	East
4	AHMC, Inc.	Various
5	AHMC, Inc. dba Garfield Medical Center	W. San Gabriel Valley
6	AHMC, Inc. dba Greater El Monte Community Hospital	W. San Gabriel Valley
7	AHMC, Inc. dba Monterey Park Hospital	W. San Gabriel Valley
8	AHMC, Inc. dba Whittier Hospital Medical Center	East
9	AHMC, Inc. dba Alhambra Hospital Medical Center	W. San Gabriel Valley
10	Alhambra Hospital Medical Center	W. San Gabriel Valley
11	Antelope Valley Health Care District dba Antelope Valley Hospital	Antelope Valley
12	Beverly Hospital	East
13	Catalina Island Medical Center	South Bay
14	Catholic Healthcare West	Various
15	California Healthcare West dba California Hospital Medical Center	Metro
16	California Healthcare West dba Glendale Memorial Hospital and Health Center	W. San Gabriel Valley
17	California Healthcare West dba Northridge Hospital	N. W. San Fernando Valley
18	California Healthcare West dba San Gabriel Valley Medical Center	W. San Gabriel Valley
19	California Healthcare West dba St. Mary Medical Center	South Bay
20	California Healthcare West dba St. Vincent Medical Center	Metro
21	CFHS Holdings, Inc. dba Centinela Freeman HealthSystem	Various
22	CFHS Holdings, Inc. dba Centinela Freeman HealthSystem - Centinela Hospital Medical Center	South
23	CFHS Holdings, Inc. dba Centinela Freeman HealthSystem - Daniel Freeman Memorial Hospital	South
24	CFHS Holdings, Inc. dba Centinela Freeman HealthSystem - Daniel Freeman Marina Hospital	West
25	CHHP, Inc.	Various
26	CHHP, Inc. dba Community Hospital of Huntington Park	East
27	CHHP, Inc. dba Mission Hospital of Huntington Park	East
28	Citrus Valley Health Partners	East San Gabriel Valley
29	Citrus Valley Health Partners dba Citrus Valley Medical Center/Inter-Community Campus	East San Gabriel Valley
30	Citrus Valley Health Partners dba Citrus Valley Medical Center/Queen of the Valley Campus	East San Gabriel Valley
31	Citrus Valley Health Partners dba Foothill Presbyterian Hospital	East San Gabriel Valley
32	Downey Regional Medical Center	East
33	Encino-Tarzana Regional Medical Center	S.W. San Fernando Valley
34	East Los Angeles Doctors Hospital	East
35	Gardena Hospital L. P. dba Memorial Hospital of Gardena	South Bay
36	Henry Mayo Newhall Memorial Hospital	Antelope Valley
37	Huntington Memorial Hospital	W. San Gabriel Valley
38	Jupiter Bellflower Doctors Hospital dba Bellflower Medical Center	East
39	L.A. Metropolitan Medical Center	South
40	Lakewood Regional Medical Center	East
41	Lancaster Community Hospital	Antelope Valley
42	Little Company of Mary Hospital - San Pedro	South Bay
43	Little Company of Mary Hospital - Torrance	South Bay
44	Long Beach Memorial Medical Center	South Bay
45	Methodist Hospital	W. San Gabriel
46	Mission Community Hospital - Panorama City Campus	NE San Fernando Valley
47	Mission Community Hospital - San Fernando Campus	NE San Fernando Valley

**COMMUNITY HEALTH PLAN  
RECOMMENDED CONTRACTORS FOR ALL PRODUCT LINES**

<b>CONTRACTOR NAME</b>		<b>PRIMARY GEOGRAPHIC DMHC* AREA(S)</b>
48	Pacific Alliance Medical Center	Metro
49	Pacific Health Corporation	Various
50	Pacifica Hospital of the Valley	NE San Fernando Valley
51	Pomona Valley Hospital Medical Center	East
52	Presbyterian Intercommunity Hospital	East
53	Robert F. Kennedy Medical Center	South
54	Sherman Oaks Hospital	SE San Fernando Valley
55	St. Francis Hospital Medical Center	South
56	Tenet	Various
57	Tenet dba Brotman Medical Center	West
58	Tenet dba Hollywood Presbyterian Medical Center	Metro
59	Tenet dba San Dimas Community Hospital	East San Gabriel Valley
60	Tenet California HealthSystem	Various
61	Tenet California HealthSystem dba Suburban Medical Center	South
62	Tenet California	Various
63	Tenet HealthCorp	Various
64	Tenet HealthSystem	Various
65	Valley Presbyterian Hospital	NE San Fernando Valley
66	Verdugo Hills Hospital	W. San Gabriel
<b>TYPE OF EXHIBIT: PRIMARY OR PRIMARY/SPECIALTY AGREEMENT</b>		
67	Accountable Health Plan Medical Group	Various
68	Alliance Health Medical Group	Various
69	Allied Physicians IPA	Various
70	Alpha Care Medical Group, Inc.	Pomona
71	Altamed Health Services Corp.	West San Gabriel Valley
72	Angeles IPA	Various
73	Arroyo Vista Family Health Center	Various
74	Asian Community Medical Group, Inc	South Bay
75	Asian Pacific Health Care Venture	Metro
76	Bao Quoc Le, MD, Inc.	South Bay
77	Bay Area Addiction and Treatment, Inc.	Various
78	Bella Vista Medical Group	West San Gabriel Valley
79	Clinica Medica San Miguel	Various
80	Clinical Msr. Oscar Romero	Metro
81	Community Family Care Medical Group IPA, Inc.	Various
82	East Los Angeles Health Task Force	West San Gabriel Valley
83	East Valley Community Health Center	East San Gabriel Valley
84	El Proyecto del Barrio, Inc.	Various
85	Employee Health Systems Medical Group, Inc.	Various
86	Exceptional Care Medical Group	Various
87	Family Health Care Centers of Greater Los Angeles, Inc.	Various
88	Franciscan Clinics	Various
89	Gallatin Medical Foundation	East
90	Global Care Medical Group	Various
91	Health Care L.A.	Various
92	Healthsmart Pacific	Various
93	Joy Medical Associates	Various
94	JWCH Institute, Inc.	Metro

**COMMUNITY HEALTH PLAN  
RECOMMENDED CONTRACTORS FOR ALL PRODUCT LINES**

<b>CONTRACTOR NAME</b>		<b>PRIMARY GEOGRAPHIC DMHC* AREA(S)</b>
95	La Vida Medical Group & IPA	Various
96	La Vida Multispecialty Medical Centers, Inc., A Medical Corporation	Various
97	Los Angeles Free Clinic	Metro
98	Medicina Familiar Medical Group	SW San Fernando Valley
99	Meridian Medical Group dba Capnet IPA	Various
100	Mission City Community Network, Inc.	NW San Fernando Valley
101	Mobohy Medical Group	Various
102	New Horizons Medical Group	Pomona
103	Noble Community Medical Associates	Various
104	Noobar Janoian, MD, A Professional Corporation	West San Gabriel Valley
105	Northeast Community Clinic	West San Gabriel Valley
106	Northeast Valley Health Corporation	NE San Fernando Valley
107	Omnicare Medical Group	South
108	Physician Healthways Medical Corporation	Various
109	Pomona Valley Medical Group dba Promed Health Network	East San Gabriel Valley
110	Preferred IPA of California	Various
111	Prospect Medical Holdings, Inc.	Various
112	Ramona Health Plan Medical Group	East San Gabriel Valley
113	Regent Medical Group	Various
114	San Miguel Medical Group	Various
115	South Atlantic Medical Group	W. San Gabriel
116	South Bay Family Healthcare Center	South Bay
117	South Central Family Health Center	South
118	Southland-San Gabriel Valley Medical Group Inc.	East
119	T.H.E. Clinic, Inc.	South
120	Tarzana Treatment Center	SW San Fernando Valley
121	The Children's Clinic	South Bay
122	URDC Human Services Corporation	W. San Gabriel Valley
123	Venice Family Clinic	West
124	Western University Medical Center	East
125	Wilmington Community Clinic	South
<b>TYPE OF EXHIBIT: NETWORK AGREEMENT</b>		
126	Care 1st Health Plan	

\* DMHC - State Department of Managed Health Care

**COMMUNITY HEALTH PLAN  
CRITERIA FOR INTERESTED CONTRACTORS**

1. Meets the administrative, programmatic, and fiscal objectives of the Community Health Plan (CHP) business model.
2. Agrees to accept as patients individuals enrolled in the CHP.
3. Locates service sites within Los Angeles County.
4. Demonstrates compliance with the geographic accessibility requirements under Knox-Keene Licensure and the State Department of Health Services.
5. Complies with CHP site certification process.
6. Complies with CHP credentialing process.
7. Agrees to cooperate in the maintenance and implementation of utilization management and quality assurance programs, submission of encounter data and other reporting requirements, and regular monitoring of all areas of service delivery to individuals enrolled in the CHP.
8. Demonstrates fiscal viability as determined by submission and review of most recent audited financial statements and last two (2) recent quarterly financial statements.
9. Agrees to comply with CHP's Insurance and Reinsurance requirements.
10. Accepts CHP's reimbursement rates or willing to negotiate reasonable reimbursement rates where appropriate.
11. Agrees to cooperate in the development and implementation of any other processes necessary in all areas of service delivery to CHP enrollees.
12. Accepts the terms and conditions of the CHP Agreement, including all the Standard Provisions required by County.
13. Joint Commission of Accreditation Healthcare Organizations (JCAHO) certified hospitals (preferred).
14. Safety Net Providers (preferred).

**SCHEDULE B-1**

**COMMUNITY HEALTH PLAN  
MEDI-CAL MANAGED CARE PROGRAM AND COUNTY TEMPORARY  
EMPLOYEES**

**REVISED CAPITATION RATES**

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(CONFIDENTIAL RATES)**

# EXHIBIT C-1

## COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES MEDI-CAL MANAGED CARE PROGRAM

### PRIMARY CARE ONLY ( PARTIAL RISK )

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY			
		IPA / MG	DHS	CHP	NOT COVERED
1	Allergy				
2	- Testing				
3	- Serum				
4	Amniocentesis				
5	Biofeedback				
6	Blood & Blood Products				
7	- Autologous Blood Donation				
8	- Other (Where Ordered)				
9	Burn Unit Treatment				
10	Cancer Screening (Routine)				
11	Chemical Dependency				
12	- Detox (When Required to Treat Other Underlying Medical Conditions)				
13	- Rehabilitation (Inpatient)				
14	- Rehabilitation (Outpatient)				
15	Chemotherapy (Non-Injectable Drugs Only)				
16	- Outpatient				
17	- Inpatient				
18	Chiropractic				
19	Circumcision (Medically Necessary)				
20	Colostomy Supplies				
21	- Outpatient				
22	- Inpatient				
23	Dental Services (Routine)				
24	Dental Services (Medically Necessary)				
25	- Facility Component				
26	- Professional Component				
27	- TMJ (Limited to Functional Impairment)				
28	Diagnostic Services - Outpatient (Where Ordered)				
29	- EKG				
30	- EEG				
31	- EMG				
32	- Treadmill (Thallium & EKG )				
33	Diagnostic Services - Inpatient				
34	- Angiography				
35	- EKG				
36	- EEG				
37	- EMG				
38	- Treadmill (Thallium & EKG)				
39	- Facility Component				

# EXHIBIT C-1

## COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES MEDI-CAL MANAGED CARE PROGRAM

### PRIMARY CARE ONLY ( PARTIAL RISK )

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY			
		IPA / MG	DHS	CHP	NOT COVERED
40	Dialysis				
41	- Facility Component				
42	- Professional Component				
43	Durable Medical Equipment (DME) (Medically Necessary)				
44	- Outpatient (Where Ordered)				
45	- Inpatient				
46	Emergency Room - Facility Component				
47	- In Service Area <sup>(a)</sup>				
48	- Out of Service Area <sup>(a)</sup>				
49	Emergency Room - Professional Component				
50	- In Service Area <sup>(a)</sup>				
51	- In Service Area <sup>(a)</sup> (Consultations)				
52	- Out of Service Area <sup>(a)</sup>				
53	Experimental Procedures				
54	Family Planning				
55	- Professional Component (Surgical)				
56	- Professional Component (Non-Surgical)				
57	- Voluntary Termination of Pregnancy (Outpatient)				
58	- Voluntary Termination of Pregnancy (Inpatient) - Professional Component				
59	- Voluntary Termination of Pregnancy (Inpatient) - Facility Component				
60	- Facility Component				
61	- Diaphragm Fitting				
62	- Intrauterine Device (IUD)				
63	- Norplant (Where Provided)				
64	- Oral Contraceptives & Diaphragm Supplies				
65	- Reversal of Sterilization				
66	- Tubal Ligation				
67	- Vasectomy				
68	Genetic Testing				
69	Health Education (Where Ordered and/or Provided)				
70	Hearing				
71	- Exam/Audiology (Medically Necessary)				
72	- Screening				
73	- Hearing Aids				
74	Home Health Care (Non-Custodial)				
75	- Home Health Nurse or Worker				
76	- Home I.V. Therapy				
77	- Home P.T.				

# EXHIBIT C-1

## COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES MEDI-CAL MANAGED CARE PROGRAM

### PRIMARY CARE ONLY ( PARTIAL RISK )

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY			
		IPA / MG	DHS	CHP	NOT COVERED
78	Hospice Services				
79	- Inpatient and Outpatient - Facility Component				
80	- Professional Component (Consultations)				
81	Hospitalization, Inpatient Services (Facility Component)				
82	- In Service Area <sup>(a)</sup>				
83	- Out of Service Area <sup>(a)</sup> Emergency				
84	Immunizations - Medically Indicated and Not Covered Under the "Injectables" Category (Where Ordered)				
85	Infertility Services				
86	- Artificial Insemination				
87	- Invitro Fertilization				
88	Injectables (Outpatient)				
89	- Injectable Chemotherapeutic Medications and Injectable Adjunct Pharmaceutical Therapies for Side Effects				
90	- Injectable Medications or Blood Products Used for Hemophilia				
91	- Injectable Medications Related to Transplant Services				
92	- Adult Vaccines (Where Ordered)				
93	- Self-Injectable Medications				
94	- Other Injectable Medication or Medication in an Implantable Dosage Form Whereby Either Medication Costs More Than \$250 per Dose				
95	- Injections and Injected Substances Less Than \$250 per Dose (Where Ordered)				
96	Laboratory Services				
97	- Outpatient (Where Ordered)				
98	- Inpatient - Facility Component				
99	- Inpatient - Professional Component				
100	Mammography				
101	- Routine Screening				
102	- Diagnostic (Where Ordered)				
103	Medication (Not Covered Under the "Injectables" Category)				
104	- Inpatient				
105	- Insulin and Syringes				
106	- IV/IM Therapy (In Lieu of Hospitalization)				
107	- O/P Prescription Drugs				
108	- Take Home / Discharge Medication/Emergency Room Medications				
109	Mental Health (Specialty)				
110	- Facility Component				
111	- Professional Component				

# EXHIBIT C-1

## COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES MEDI-CAL MANAGED CARE PROGRAM

### PRIMARY CARE ONLY ( PARTIAL RISK )

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY			
		IPA / MG	DHS	CHP	NOT COVERED
112	Newborn Care				
113	Obstetrical Care				
114	- Outpatient Diagnostic Services				
115	- Inpatient Labor and Delivery (Facility Component)				
116	- Prenatal and Postpartum Care (High Risk Responsibility to DHS)				
117	- Delivery - Professional Component				
118	Office Visit Supplies (Where Provided)				
119	Organ Transplants (Kidney and Cornea Transplants Only)				
120	Outpatient Surgery				
121	- Facility and Supplies, Medicines				
122	- Professional - Radiology, Pathology, Anesthesia				
123	- Professional - Other (Surgeon, Asst. Surgeon, Other)				
124	Physical , Occupational, & Speech Therapy - Inpatient				
125	- Professional Component				
126	- Facility Component				
127	Physical , Occupational, & Speech Therapy - Outpatient				
128	- Professional Component				
129	- Facility Component				
130	Physicians Services- Hospital Based				
131	- Anesthesiology				
132	- Pathology				
133	- Radiology				
134	Physician Services - Inpatient				
135	- In Service Area <sup>(a)</sup>				
136	- Out of Service Area <sup>(a)</sup> Emergency				
137	Physician Services - Outpatient				
138	- In Service Area <sup>(a)</sup> - Primary Care (Includes to Patient's Home)				
139	- In Service Area <sup>(a)</sup> - Specialty Care (Includes to Patient's Home)				
140	- Out of Service Area <sup>(a)</sup> Emergency				
141	Podiatry Services (By Referral when Medically Necessary)				
142	Prostheses , Orthoses and Medical Devices				
143	- Inpatient				
144	- Outpatient (Where Ordered)				
145	Radiation Therapy				
146	- Professional Component				
147	- Technical Component				

# EXHIBIT C-1

## COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES MEDI-CAL MANAGED CARE PROGRAM

### PRIMARY CARE ONLY ( PARTIAL RISK )

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY			
		IPA / MG	DHS	CHP	NOT COVERED
148	Radiology Services (Professional ) / Outpatient (Routine) (Where Ordered)				
149	- CAT Scans				
150	- ECHO				
151	- MRI				
152	- Ultrasound				
153	Radiology Services (Professional ) / Inpatient (Routine)				
154	- CAT Scans				
155	- ECHO				
156	- MRI				
157	- Ultrasound				
158	Reconstructive Surgery (Medically Necessary)				
159	- Facility Component				
160	- Professional Component				
161	Second Medical Opinion (Where Requested)				
162	Skilled Nursing Facility (SNF)				
163	Tertiary/Specialized Care (Move to DHS Facility as soon as Medically Feasible)				
164	- Burn				
165	- Spinal Rehabilitation				
166	- Neonatal ICU Level 3 or Higher				
167	Transportation (Ground) - In Service Area <sup>(a)</sup>				
168	- Ambulance (Emergency)				
169	- Ambulance (Non-Emergency)				
170	- Other (Non-Air) (Where Ordered)				
171	Transportation (Ground) - Out of Service Area <sup>(a)</sup>				
172	- Ambulance (Emergency)				
173	- Ambulance (Non-Emergency)				
174	- Other (Non-Air)				
175	Transportation (Air) Emergency				
176	- In Service Area <sup>(a)</sup>				
177	- Out of Service Area <sup>(a)</sup>				
178	Vision Care				
179	- Screening				
180	- Refractions				
181	- Eyeglasses <sup>(b)</sup> / Contact Lenses (Medically necessary)				

(a) Service Area is defined as within the geographic boundaries of Los Angeles County.  
Transportation provided when medically necessary and/or appropriate.

(b) Lenses ordered through Prison Industry Authority (PIA).

**EXHIBIT C-1**

**COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES  
DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES  
MEDI-CAL MANAGED CARE PROGRAM**

**PRIMARY AND SPECIALTY CARE / HOSPITAL SERVICES ( FULL RISK )**

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY				
		CONTRACTOR			CHP	NOT COVERED
		PRIMARY <sup>(1)</sup>	SPECIALTY <sup>(1)</sup>	HOSPITAL <sup>(2)</sup>		
1	Allergy					
2	- Testing					
3	- Serum					
4	Amniocentesis					
5	Biofeedback					
6	Blood & Blood Products					
7	- Autologous Blood Donation					
8	- Other (Where Ordered)					
9	Burn Unit Treatment					
10	Cancer Screening (Routine)					
11	Chemical Dependency					
12	- Detox (When Required to Treat Other Underlying Medical Conditions)					
13	- Rehabilitation (Inpatient)					
14	- Rehabilitation (Outpatient)					
15	Chemotherapy (Non-Injectable Drugs Only)					
16	- Outpatient					
17	- Inpatient					
18	Chiropractic					
19	Circumcision (Medically Necessary)					
20	Colostomy Supplies					
21	- Outpatient					
22	- Inpatient					
23	Dental Services (Routine)					
24	Dental Services (Medically Necessary)					
25	- Facility Component					
26	- Professional Component					
27	- TMJ (Limited to Functional Impairment)					
28	Diagnostic Services - Outpatient (Where Ordered)					
29	- EKG					
30	- EEG					
31	- EMG					
32	- Treadmill (Thallium & EKG )					
33	Diagnostic Services - Inpatient					
34	- Angiography					
35	- EKG					
36	- EEG					
37	- EMG					
38	- Treadmill (Thallium & EKG)					
39	- Facility Component					
40	Dialysis					
41	- Facility Component					
42	- Professional Component					
43	Durable Medical Equipment (DME) (Medically Necessary)					
44	- Outpatient (Where Ordered)					
45	- Inpatient					
46	Emergency Room - Facility Component					
47	- In Service Area <sup>(a)</sup>					
48	- Out of Service Area <sup>(a)</sup>					
49	Emergency Room - Professional Component					
50	- In Service Area <sup>(a)</sup>					
51	- In Service Area <sup>(a)</sup> (Consultations)					
52	- Out of Service Area <sup>(a)</sup>					
53	Experimental Procedures					

# EXHIBIT C-1

## COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES MEDI-CAL MANAGED CARE PROGRAM

### PRIMARY AND SPECIALTY CARE / HOSPITAL SERVICES ( FULL RISK )

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY				
		CONTRACTOR			CHP	NOT COVERED
		PRIMARY <sup>(1)</sup>	SPECIALTY <sup>(1)</sup>	HOSPITAL <sup>(2)</sup>		
54	Family Planning					
55	- Professional Component (Surgical)					
56	- Professional Component (Non-Surgical)					
57	- Voluntary Termination of Pregnancy (Outpatient)					
58	- Voluntary Termination of Pregnancy (Inpatient) - Professional Component					
59	- Voluntary Termination of Pregnancy (Inpatient) - Facility Component					
60	- Facility Component					
61	- Diaphragm Fitting					
62	- Intrauterine Device (IUD)					
63	- Norplant (Where Provided)					
64	- Oral Contraceptives & Diaphragm Supplies					
65	- Reversal of Sterilization					
66	- Tubal Ligation					
67	- Vasectomy					
68	Genetic Testing					
69	Health Education (Where Ordered and/or Provided)					
70	Hearing					
71	- Exam/Audiology (Medically Necessary)					
72	- Screening					
73	- Hearing Aids					
74	Home Health Care (Non-Custodial)					
75	- Home Health Nurse or Worker					
76	- Home I.V. Therapy					
77	- Home P.T.					
78	Hospice Services					
79	- Inpatient and Outpatient - Facility Component					
80	- Professional Component (Consultations)					
81	Hospitalization, Inpatient Services (Facility Component)					
82	- In Service Area <sup>(a)</sup>					
83	- Out of Service Area <sup>(a)</sup> Emergency					
84	Immunizations - Medically Indicated and Not Covered Under the "Injectables" Category (Where Ordered)					
85	Infertility Services					
86	- Artificial Insemination					
87	- Invitro Fertilization					
88	Injectables (Outpatient)					
89	- Injectable Chemotherapeutic Medications and Injectable Adjunct Pharmaceutical Therapies for Side Effects					
90	- Injectable Medications or Blood Products Used for Hemophilia					
91	- Injectable Medications Related to Transplant Services					
92	- Adult Vaccines (Where Ordered)					
93	- Self-Injectable Medications					
94	- Other Injectable Medication or Medication in an Implantable Dosage Form Whereby Either Medication Costs More Than \$250 per Dose					
95	- Injections and Injected Substances Less Than \$250 per Dose (Where Ordered)	X	X			
96	Laboratory Services					
97	- Outpatient (Where Ordered)					
98	- Inpatient - Facility Component					
99	- Inpatient - Professional Component					
100	Mammography					
101	- Routine Screening					
102	- Diagnostic (Where Ordered)					

**EXHIBIT C-1**

**COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES  
DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES  
MEDI-CAL MANAGED CARE PROGRAM**

**PRIMARY AND SPECIALTY CARE / HOSPITAL SERVICES ( FULL RISK )**

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY				
		CONTRACTOR			CHP	NOT COVERED
		PRIMARY <sup>(1)</sup>	SPECIALTY <sup>(1)</sup>	HOSPITAL <sup>(2)</sup>		
103	Medication (Not Covered Under the "Injectables" Category)					
104	- Inpatient					
105	- Insulin and Syringes					
106	- IV/IM Therapy (In Lieu of Hospitalization)					
107	- O/P Prescription Drugs					
108	- Take Home / Discharge Medication/Emergency Room Medications					
109	Mental Health (Specialty)					
110	- Facility Component					
111	- Professional Component					
112	Newborn Care					
113	Obstetrical Care					
114	- Outpatient Diagnostic Services					
115	- Inpatient Labor and Delivery (Facility Component)					
116	- Prenatal and Postpartum Care (High Risk Responsibility to CHP)					
117	- Delivery - Professional Component					
118	Office Visit Supplies (Where Provided)					
119	Organ Transplants (Except for Kidney and Cornea Transplants)					
120	Outpatient Surgery					
121	- Facility and Supplies, Medicines					
122	- Professional - Radiology, Pathology, Anesthesia					
123	- Professional - Other (Surgeon, Asst. Surgeon, Other)					
124	Physical , Occupational, & Speech Therapy - Inpatient					
125	- Professional Component					
126	- Facility Component					
127	Physical , Occupational, & Speech Therapy - Outpatient					
128	- Professional Component					
129	- Facility Component					
130	Physicians Services- Hospital Based					
131	- Anesthesiology					
132	- Pathology					
133	- Radiology					
134	Physician Services - Inpatient					
135	- In Service Area <sup>(a)</sup>					
136	- Out of Service Area <sup>(a)</sup> Emergency					
137	Physician Services - Outpatient					
138	- In Service Area <sup>(a)</sup> - Primary Care (Includes to Patient's Home)					
139	- In Service Area <sup>(a)</sup> - Specialty Care (Includes to Patient's Home)					
140	- Out of Service Area <sup>(a)</sup> Emergency					
141	Podiatry Services (By Referral when Medically Necessary)					
142	Prostheses , Orthoses and Medical Devices					
143	- Inpatient					
144	- Outpatient (Where Ordered)					
145	Radiation Therapy					
146	- Professional Component					
147	- Technical Component					
148	Radiology Services (Professional ) / Outpatient (Routine) (Where Ordered)					
149	- CAT Scans					
150	- ECHO					
151	- MRI					
152	- Ultrasound					
153	Radiology Services (Professional ) / Inpatient (Routine)					
154	- CAT Scans					
155	- ECHO					
156	- MRI					
157	- Ultrasound					

# EXHIBIT C-1

## COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES DIVISION OF FINANCIAL RESPONSIBILITY FOR HEALTH CARE SERVICES MEDI-CAL MANAGED CARE PROGRAM

### PRIMARY AND SPECIALTY CARE / HOSPITAL SERVICES ( FULL RISK )

LINE NO.	LIST OF BENEFITS	FINANCIAL RESPONSIBILITY				
		CONTRACTOR			CHP	NOT COVERED
		PRIMARY <sup>(1)</sup>	SPECIALTY <sup>(1)</sup>	HOSPITAL <sup>(2)</sup>		
158	Reconstructive Surgery (Medically Necessary)					
159	- Facility Component					
160	- Professional Component					
161	Second Medical Opinion (Where Requested)					
162	Skilled Nursing Facility (SNF)					
163	Tertiary/Specialized Care (Move to DHS Facility as soon as Medically Feasible)					
164	- Burn					
165	- Spinal Rehabilitation					
166	- Neonatal ICU Level 3 or Higher					
167	Transportation (Ground) - In Service Area <sup>(a)</sup>					
168	- Ambulance (Emergency)					
169	- Ambulance (Non-Emergency)					
170	- Other (Non-Air) (Where Ordered)					
171	Transportation (Ground) - Out of Service Area <sup>(a)</sup>					
172	- Ambulance (Emergency)					
173	- Ambulance (Non-Emergency)					
174	- Other (Non-Air)					
175	Transportation (Air) Emergency					
176	- In Service Area <sup>(a)</sup>					
177	- Out of Service Area <sup>(a)</sup>					
178	Vision Care					
179	- Screening					
180	- Refractions					
181	- Eyeglasses / Contact Lenses (Medically necessary)					

(a) Service Area is defined as within the geographic boundaries of Los Angeles County.

Transportation provided when medically necessary and/or appropriate.

(b) Kidney and Cornea transplants are the financial responsibility of CHP.

(1) Primary and Specialty Care Services are provided by (CONTRACTOR NAME)

(2) Hospital Services are provided by (HOSPITAL NAME)

# No shame.

# No blame.

# No names.

Newborns can be safely given up  
at any Los Angeles County  
hospital emergency room or fire station.



In Los Angeles County:

1-877-BABY SAFE

1-877-222-9723

[www.babysafela.org](http://www.babysafela.org)



State of California  
Gray Davis, Governor

Health and Human Services Agency  
Grantland Johnson, Secretary

Department of Social Services  
Rita Saenz, Director



Los Angeles County Board of Supervisors

Gloria Molina, Supervisor, First District

Yvonne Brathwaite Burke, Supervisor, Second District

Zev Yaroslavsky, Supervisor, Third District

Don Knabe, Supervisor, Fourth District

Michael D. Antonovich, Supervisor, Fifth District

This initiative is also supported by First 5 LA and INFO LINE of Los Angeles

### What is the Safely Surrendered Baby Law?

California's Safely Surrendered Baby Law allows parents to give up their baby confidentially. As long as the baby has not been abused or neglected, parents may give up their newborn without fear of arrest or prosecution.

### How does it work?

A distressed parent who is unable or unwilling to care for a baby can legally, confidentially and safely give up a baby within three days of birth. The baby must be handed to an employee at a Los Angeles County emergency room or fire station. As long as the child shows no signs of abuse or neglect, no name or other information is required. In case the parent changes his or her mind at a later date and wants the baby back, workers will use bracelets to help connect them to each other. One bracelet will be placed on the baby, and a matching bracelet will be given to the parent.

### What if a parent wants the baby back?

Parents who change their minds can begin the process of reclaiming their newborns within 14 days. These parents should call the Los Angeles County Department of Children and Family Services at 1-800-540-4000.

### Can only a parent bring in the baby?

In most cases, a parent will bring in the baby. The law allows other people to bring in the baby if they have legal custody.

### Does the parent have to call before bringing in the baby?

No. A parent can bring in a baby anytime, 24 hours a day, 7 days a week so long as the parent gives the baby to someone who works at the hospital or fire station.

### Does a parent have to tell anything to the people taking the baby?

No. However, hospital personnel will ask the parent to fill out a questionnaire designed to gather important medical history information, which is very useful in caring for the child. Although encouraged, filling out the questionnaire is not required.

### What happens to the baby?

The baby will be examined and given medical treatment, if needed. Then the baby will be placed in a pre-adoptive home.

### What happens to the parent?

Once the parent(s) has safely turned over the baby, they are free to go.

### Why is California doing this?

The purpose of the Safely Surrendered Baby Law is to protect babies from being abandoned by their parents and potentially being hurt or killed. You may have heard tragic stories of babies left in dumpsters or public bathrooms. The parents who committed these acts may have been under severe emotional distress. The mothers may have hidden their pregnancies, fearful of what would happen if their families found out. Because they were afraid and had nowhere to turn for help, they abandoned their infants. Abandoning a baby puts the child in extreme danger. It is also illegal. Too often, it results in the baby's death. Because of the Safely Surrendered Baby Law, this tragedy doesn't ever have to happen in California again.

### A baby's story

At 8:30 a.m. on Thursday, July 25, 2002, a healthy newborn baby was brought to St. Bernardine Medical Center in San Bernard no under the provisions of the California Safely Surrendered Baby Law. As the law states, the baby's mother did not have to identify herself. When the baby was brought to the emergency room, he was examined by a pediatrician, who determined that the baby was healthy and doing fine. He was placed with a loving family while the adoption process was started.

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Every baby deserves a chance for a healthy life. If someone you know is considering abandoning a newborn, let her know there are other options.

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***It is best that women seek help to receive proper medical care and counseling while they are pregnant. But at the same time, we want to assure parents who choose not to keep their baby that they will not go to jail if they deliver their babies to safe hands in any Los Angeles County hospital ER or fire station.***

# Sin pena. Sin culpa. Sin peligro.

Los recién nacidos pueden ser entregados  
en forma segura en la sala de emergencia de  
cualquier hospital o en un cuartel de bomberos  
del Condado de Los Angeles.



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Estado de California  
Gray Davis, Gobernador

Agencia de Salud y Servicios Humanos  
(Health and Human Services Agency)  
Grantland Johnson, Secretario

Departamento de Servicios Sociales  
(Department of Social Services)  
Nita Saenz, Directora



Consejo de Supervisores del Condado de Los Angeles

Gloria Molina, Supervisora, Primer Distrito

Nonne Bradnivalle Burke, Supervisora, Segundo Distrito

Zev Yaroslavsky, Supervisor, Tercer Distrito

Don Knabe, Supervisor, Cuarto Distrito

Michael D. Antonovich, Supervisor, Quinto Distrito

Esta iniciativa también está apoyada por First 5 LA y INPG LINE de Los Angeles.

### ¿Qué es la Ley de Entrega de Bebés Sin Peligro?

La Ley de Entrega de Bebés Sin Peligro de California permite a los padres entregar a su recién nacido confidencialmente. Siempre que el bebé no haya sufrido abuso ni negligencia, padres pueden entregar a su recién nacido sin temor a ser arrestados o procesados.

### ¿Cómo funciona?

El padre/madre con dificultades que no pueda o no quiera cuidar de su recién nacido puede entregarlo en forma legal, confidencial y segura, dentro de los tres días del nacimiento. El bebé debe ser entregado a un empleado de una sala de emergencias o de un cuartel de bomberos del Condado de Los Angeles. Siempre que el bebé no presente signos de abuso o negligencia, no será necesario suministrar nombres ni información alguna. Si el padre/madre cambia de opinión posteriormente y desea recuperar a su bebé, los trabajadores utilizarán brazaletes para poder vincularlos. El bebé llevará un brazalete y el padre/madre recibirá un brazalete igual.

### ¿Qué pasa si el padre/madre desea recuperar a su bebé?

Los padres que cambien de opinión pueden empezar el proceso de redamar a su recién nacido dentro de los 14 días. Estos padres deberán llamar al Departamento de Servicios para Niños y Familias (Department of Children and Family Services) del Condado de Los Angeles, al 1-800-540-4000.

### ¿Sólo los padres podrán llevar al recién nacido?

En la mayoría de los casos, los padres son los que llevan al bebé. La ley permite que otras personas lleven al bebé si tienen la custodia legal del menor.

### ¿Los padres deben llamar antes de llevar al bebé?

No. El padre/madre puede llevar a su bebé en cualquier momento, las 24 horas del día, los 7 días de la semana, mientras que entregue a su bebé a un empleado del hospital o de un cuartel de bomberos.

### ¿Es necesario que el padre/madre diga algo a las personas que reciben al bebé?

No. Sin embargo, el personal del hospital le pedirá que llene un cuestionario con la finalidad de recabar antecedentes médicos importantes, que resultan de gran utilidad para los cuidados que recibirá el bebé. Es recomendado llenar este cuestionario, pero no es obligatorio hacerlo.

### ¿Qué ocurrirá con el bebé?

El bebé será examinado y, de ser necesario, recibirá tratamiento médico. Luego el bebé se entregará a un hogar preadoptivo.

### ¿Qué pasará con el padre/madre?

Una vez que los padres hayan entregado a su bebé en forma segura, serán libres de irse.

### ¿Por qué California hace esto?

La finalidad de la Ley de Entrega de Bebés Sin Peligro es proteger a los bebés del abandono por parte de sus padres y de la posibilidad de que mueran o sufran daños. Usted probablemente haya escuchado historias trágicas sobre bebés abandonados en basureros o en baños públicos. Es posible que los padres que cometieron estos actos hayan estado atravesando dificultades emocionales graves. Las madres pueden haber ocultado su embarazo, portemor a lo que pasaría si sus familias se enteraran. Abandonaron a sus recién nacidos porque tenían miedo y no tenían adonde recurrir para obtener ayuda. El abandono de un recién nacido lo pone en una situación de peligro extremo. Además es ilegal. Muy a menudo el abandono provoca la muerte del bebé. Ahora, gracias a la Ley de Entrega de Bebés Sin Peligro, esta tragedia ya no debe suceder nunca más en California.

### Historia de un bebé

A las 8:30 a.m. del jueves 25 de julio de 2002, se entregó un bebé recién nacido saludable en el St. Bernardine Medical Center en San Bernardino, en virtud de las disposiciones de la Ley de Entrega de Bebés Sin Peligro. Como lo establece la ley, la madre del bebé no se tuvo que identificar. Cuando el bebé llegó a la sala de emergencias, un pediatra lo revisó y determinó que el bebé estaba saludable y no tenía problemas. El bebé fue ubicado con una buena familia, mientras se iniciaban los trámites de adopción.

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Cada recién nacido merece una oportunidad de tener una vida saludable. Si alguien que usted conoce está pensando en abandonar a un recién nacido, infórmele qué otras opciones tiene.

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**Es mejor que las mujeres busquen ayuda para recibir atención médica y asesoramiento adecuado durante el embarazo. Pero al mismo tiempo, queremos asegurarnos a los padres que optan por no quedarse con su bebé que no irán a la cárcel si dejan a sus bebés en buenas manos en cualquier sala de emergencia de un hospital o en un cuartel de bomberos del Condado de Los Angeles.**